

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.
101731905

FILING DATE

13121/04

CLAIMS

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24	2				
25	2				
26	2				
27	1				
28	1				
29	1				
30	1				
31	1				
32	1				
33	1				
34	1				
35					
36					
37					
38					
39					
40					
41					
42					
43					
44					
45					
46					
47					
48					
49					
50					
TOTAL IND.		3			
TOTAL DEP.		18			
TOTAL CLAIMS		21			

TOTAL IND.		1	1	1
TOTAL DEP.		1	1	1
TOTAL CLAIMS		1	1	1

BEST AVAILABLE COPY